Food and Formula Reference Guide (FFRG)

Guidelines

Effective – September 1, 2019

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Acronyms, Abbreviations, and Symbols

Acronyms and Abbreviations (Refer to the Health and Nutrition Assessment Handbook - Standard Abbreviations and Meanings.)				
LA = local agency	Nutr = LA nutritionist	F/V = fruits and vegetables	CVB = cash value benefit	Symbols
SA = state agency	RD = LA registered dietitian	PWD = powder	conc = concentrated liquid	≥ greater than OR equal to
State RD = SA registered dietitian		RTU = ready-to-use	evap = evaporated milk	≤ less than OR equal to
CPA = competent professional authority		HMF = Human Milk Fortifie	> greater than	
WIC-27 = Medical Do	ocumentation - Health Care Provide	r Authorization for Special Formu	ulas and WIC Supplemental Foo	d

Guidelines for Issuing Infant Formulas, Exempt Formulas, and WIC-eligible Nutritionals (Refer to policy 2.07000)

Qualifying Conditions for Issuance of Missouri WIC-approved Foods, Infant Formulas, Exempt Formulas, and WIC-eligible Nutritionals

Participant Category	Qualifying conditions including, but not limited to:	Non-qualifying conditions
Infants	 Premature birth Low birth weight Failure to thrive Inborn errors of metabolism and metabolic disorders Gastrointestinal disorders Malabsorption syndromes Immune system disorders Severe food allergies requiring an elemental formula Life threatening disorders, diseases, and medical conditions that impair ingestion, digestion, absorption, or the utilization of nutrients that could adversely affect the participant's nutritional status 	 Non-specific formula or food intolerance (e.g., fussiness, gas, spitting up, constipation, and colic) Diagnosed formula intolerance or food allergy to lactose, sucrose, milk protein, or soy protein that does not require use of an exempt infant formula
Children and Women	 Premature birth <u>children only</u> Failure to thrive <u>children only</u> Inborn errors of metabolism and metabolic disorders Gastrointestinal disorders Malabsorption syndromes Immune system disorders Severe food allergies requiring an elemental formula Life threatening disorders, diseases, and medical conditions that impair ingestion, digestion, absorption, or the utilization of nutrients that could adversely affect the participant's nutritional status 	 Food intolerance to lactose or milk protein that can be successfully managed with the use of one of the other WIC food packages Solely for the purpose of enhancing nutrient intake or managing body weight without an underlying qualifying condition

Infants 6-11 Months of Age Who Cannot Consume Complementary Infant Foods

Infants 6-11 months of age, whose medical condition prevents them from consuming complementary infant foods, may receive contract and exempt infant formula at the same maximum monthly allowance as infants 4-5 months of age with the same feeding option. A <u>WIC-27</u> form is required. If additional formula is required, complete this process:

- 1. On the Health Information tab, select the 'Food Package III' check box and the system will inserts today's date in the 'Date Food Package III Verified' field.
- 2. On the Food Prescription tab, add a new food prescription.
- 3. MOWINS will then allow the maximum amount as indicated on the WIC-27.

Issuance of Ready to Use (RTU) Formula (Refer to policies 2.07000, 2.07600, and 2.08100)

Circumstances when RTU formulas can be issued:

- 1. There is an unsanitary, unsafe, or restricted water supply.
- 2. The participant's household has poor refrigeration facilities.
- 3. The person caring for an infant may have difficulty in correctly diluting the concentrated liquid formula or reconstituting powderformula.
- 4. The prescribed formula is only available in the RTU form.
- 5. The RTU formula accommodates the participant's condition better or improves the participant's compliance in consuming the prescribed WIC formula. The participant must have a qualifying condition (food package III) and the WIC-27 form must state the reason RTU formula is needed.

Exempt Formula and WIC-eligible Nutritionals Obtained Through an Authorized WIC Retailer, Pharmacy, or Direct Shipment

Ordering through an authorized WIC retailer or pharmacy

- 1. LA staff should contact a WIC authorized retailer or pharmacy to check on the availability of the exempt formula prescribed before issuing benefits.
- 2. Depending on the circumstances, the LA staff or the participant with LA staff assistance, will order the formula.
- 3. The WIC-authorized retailer or pharmacy orders the formula for the participant upon request.
- 4. Formula ordered must be picked up by the participant before the Last-Date-To-Use (LDTU) on the food instrument.
- 5. Participants should be educated to not accept dented cans of formula from a WIC authorized retailer or pharmacy. Dented cans should be returned to the WIC authorized retailer or pharmacy.

Ordering a direct shipment from the SA

- 1. Make sure the participant is in a current certification. Do not issue formula to terminated participants.
- 2. Call the SA at 800-392-8209 to arrange for a direct shipment of the formula to the LA.
- 3. If any food instruments were issued, but later the formula was direct shipped, the food instruments must be returned back to the LA and voided. (Refer to policy 3.06100)
- 4. When the LA receives the shipment of formula, verify the formula was received as stated on the packing slip.
- 5. Inspect all cans at the time of delivery. Dented cans should not be accepted. The SA does not issue or pay for dented cans of formula.
- 6. If the shipment of formula was signed for and the damaged cans were noticed later, contact the SA at 800-392-8209 for a replacement for the dented or damaged cans.
- 7. The LA must not issue more than the monthly maximum allowance as indicated in FFRG Formula Listing.

Extra or Unused Exempt Formula and WIC-eligible Nutritionals

When an LA has extra or unused formula or WIC-eligible nutritionals that could be used by another LA, contact the SA at 800-392-8209. The SA will provide shipping instructions and labels. Provide the following information:

Information on extra or unused formula		<u>Exa</u>	Example (If you have 3 cans of unused Calcilo XD)		
1.	Formula name	1.	Formula name	Calcilo XD	
2.	Formula row number in FFRG	2.	Formula row number in FFRG	#34	
3.	Expiration date	3.	Expiration date	April 30, 2020	
4.	Agency name	4.	Agency name	ABC agency	
5.	Phone number	5.	Phone number	123-456-7890	
6.	Type (PWD, RTU, conc)	6.	Туре	PWD	
7.	Can size	7.	Can size	13.2 oz	
8.	Number of cans available	8.	Number of cans available	3 cans	
9.	Contact person	9.	Contact person	Joan Smith	
10.	Picture of the formula	10.	Picture of the formula		

Maximum Monthly Allowances

Feeding Options	Type of Formula	0-1 months of age	2-3 months of age	4-5 months of age	6-11 months of age
Nonbreastfeeding and	Reconstituted Liquid Conc	823 fl oz	823 fl oz	896 fl oz	630 fl oz
Partially (Some) Breastfeeding Infant	RTU	832 fl oz	832 fl oz	913 fl oz	643 fl oz
Breastreeding infant	Reconstituted PWD	870 fl oz	870 fl oz	960 fl oz	696 fl oz
Partially (Mostly)	Reconstituted Liquid Conc	n/a	388 fl oz	460 fl oz	315 fl oz
Breastfeeding Infant	RTU	n/a	384 fl oz	474 fl oz	338 fl oz
	Reconstituted PWD	n/a	435 fl oz	522 fl oz	384 fl oz

The maximum monthly allowance for children and women is 910 fl oz for reconstituted liquid concentrate, read-to-use, and reconstituted powder formula or medical nutritional.

Calorie Adjustment of a Formula – [Health Care Provider (HCP) provides mixing instructions with a dilution different than what is on the label] LA CPA or nutritionist has authority to approve this request.

- 1. A completed <u>WIC-27</u> form and mixing instructions from an HCP must be scanned into MOWINS.
- 2. Review the mixing instructions. If guidance is needed, call SA at 800-392-8209 and request to speak with a state nutritionist.
- 3. The quantity of formula issued shall not exceed the monthly maximum allowance (using the standard dilution rate) as indicated on the <u>Maximum Monthly Allowances</u> table.
- 4. Ensure the participant understands the mixing instructions from the HCP.

Issuance of More Than One Formula

- 1. LA RD has authority to approve the request for any combinations of two formulas.
- 2. LA RD must document the quantity of each formula and the total volume issued for the month.
- 3. The quantity of formula issued shall not exceed the monthly maximum allowance (using the standard dilution rate) as indicated on the <u>Maximum Monthly Allowances</u> table.

Exchange Returned Formulas – Rebate Formulas, Exempt Formulas, and WIC-eligible Nutritionals How to Determine the Number of Cans to Be Issued

Example: A nonbreastfeeding infant (1 month of age) who was born on January 5, 2019 received <u>9 cans</u> of Gentlease (PWD) for the month of February. On February 5, 2019 the participant returned <u>7 cans</u> with a WIC-27 form for Nutramigen with Enflora LGG (PWD). How many cans of Nutramigen with Enflora LGG should be issued?

Step 1: Gather the following information:

- Reconstituted yield per can (use Yield/Unit in MOWINS column FFRG Formula Listing)
- <u>Maximum Monthly Allowances</u> table on page 5

Step 2: Determine how much formula the infant used.

[The number of cans used] x [Reconstituted yield of Gentlease per can] = [Amount of Gentlease the infant used]

2 cans x 90 fl oz = 180 fl oz

Step 3: Determine the maximum amount allowed for the exchange.

Maximum monthly allowance for the infant	870 fl oz / month
Amount of formula (Gentlease) the infant used	180 fl oz
Maximum reconstituted amount of Nutramigen with Enflora LGG that can be issued	690 fl oz [870 fl oz – 180 fl oz = 690 fl oz]

Step 4: Determine the number of cans to issue.

[Maximum allowance for the exchange] [Reconstituted yield of Nutramigen with Enflora LGG per can] = [The number of cans to issue] 690 fl oz 87 fl oz = 7.9 cans

Step 5: Round the number of cans down to a whole can.

Round the number of cans (7.9 cans) down to 7 cans.

Issue 7 cans of Nutramigen with Enflora LGG.

Issuing Supplemental Formula

Amount of formula (fl. oz) nor day	Amount of formula (fl oz) per month	Powder Formula	Concentrate Formula
Amount of formula (fl oz) per day	Amount of formula (if oz) per month	# of cans to issue per month*	# of cans to issue per month*
3	93	1 can	N/A
6	186	2 cans	N/A
9	279	3 cans	N/A
12	372	4 cans	N/A
15	465	5 cans	18 cans
18	558	6 cans	21 cans
21	651	7 cans	25 cans
24	744	8 cans	29 cans
27	837	9 cans	32 cans
30	930	10 cans	34 cans

^{*}Up to the maximum allowed per the age of the infant.

Issuance of Human Milk Fortifier (HMF)

- 1. When an LA gets a request for HMF, the LA must contact the SA at 800-392-8209 for approval and direct shipment.
- Breastfed infants who receive HMF are considered "mostly or some breastfeeding" and the mother should receive the appropriate food package.
- 3. Issuing a combination of HMF and formula is not allowed.
- 4. HMF can be issued to infants aged 2 weeks old to 3 months old.
- 5. A maximum monthly allowance is 240 packets per month (60 packets per week).
- 6. The SA will ship a maximum of 60 packets of HMF at a time to the LA. A new request must be made each week for an additional 60 packets, not to exceed 240 packets permonth.

The LA nutritionist must have the following information before contacting the SA:

- 1. Mother and infant's food packages
- 2. Age of infant in weeks
- 3. Medical diagnosis supporting a request for HMF
- 4. Body weight of infant at time of hospital discharge
- 5. A WIC-27 form requesting HMF
- 6. Number of packets per day requested by HCP

- HMF is for very low birth weight (VLBW) infants and is specifically designed to be used as a supplement to be added to mother's own milk.
- Low birth weight infants fed human milk in the hospital maybe supplemented with HMF from 2 weeks of age until they are approximately 2 kg (4.4 pounds) in body weight.
- Usually the infant will not need supplementation post hospital discharge; however, if the infant is discharged prior to obtaining the 2 kg (4.4 pounds) goal or there are other medical indications determined by their HCP, the infant may require HMF post hospital discharge.

WIC-approved Food and Food Packages

Mother and Baby Dyad

PWD formula = Quantity based on Enfamil Infant (PWD 12.5 oz can) B = Breastfeeding; N = Nonbreastfeeding; F/V = Fruit and Vegetables

Feeding Choice		Infant Birth-1 month of age	Infant 2-3 months of age	Infant 4-5 months of age	Infant 6-11 months of age
Fully Breastfeeding	Each Month Baby gets:	Mother's Mil	k- The only thing baby no	 Breast milk 24 oz infant cereal Up to 64 (4 oz container) infant F/V* Up to 31 (2.5 oz container) infant meats 	
Mother's Program Category: B	Each Month Mother gets:	Food Package VII	Food Package VII	Food Package VII	Food Package VII
Partially (Mostly) Breastfeeding	Each Month Baby gets:	Food package is not available.	Breast milk PWD formula (up to 4 cans)	Breast milk PWD formula (up to 5 cans)	 Breast milk PWD formula (up to 4 cans) 24 oz infant cereal Up to 32 (4 oz container) infant F/V**
Mother's Program Category: B	Each Month Mother gets:	not available.	Food Package V	Food Package V	Food Package V
Partially (Some) Breastfeeding	Each Month Baby gets:	Breast milkPWD formula (1 - 9 cans)	Breast milkPWD formula (5 – 9 cans)	Breast milkPWD formula (6-10 cans)	 Breast milk PWD formula (5-7 cans) 24 oz infant cereal Up to 32 (4 oz container) infant F/V**
Mother's Program Category: B	Each Month Mother gets:	Food Package VI	Food Package VI	Food Package VI	 Mother no longer receives food benefits. Mother receives all other benefits (Nutrition education and counseling, breastfeeding support, referrals). Counts in participation caseload.
Nonbreastfeeding Mother's Program Category: N	Each Month Baby gets:	PWD formula (up to 9 cans)	PWD formula (up to 9 cans)	PWD formula (up to 10 cans)	 PWD formula (up to 7 cans) 24 oz infant cereal Up to 32 (4 oz container) infant F/V**
	Each Month Mother gets:	Food Package VI	Food Package VI	Food Package VI	Mother no longer eligible for the WIC program.

^{*\$8} CVB for fresh F/V can be substituted for 32 (4 oz) containers for infants 9-11 months of age.

^{**\$4} CVB for fresh F/V can be substituted for 16 (4 oz) containers for infants 9-11 months of age.

WIC Certifier Role – Issuance of WIC Foods and Food Packages (Refer to policy 2.01650)

WIC certifier is allowed to make the following food package changes:

Prescribe standard food packages and standard contract formula.

Prescribe milk substitutions below:

Children	12-23 months of age
Cheese (1	lb) and one of the
following	items:

- Whole evap milk (1 can)
- Whole milk (1 qt)

Children (24-59 months of age) Cheese (1 lb.) and one of the

- Fat-free evap milk (1 can)
- Low-fat/skim milk (1 qt)
- Buttermilk (1 qt)

following items:

Yogurt (32 oz)

Women Who Receive Food Package V or VI

- Pregnant
- Pregnant and some breastfeeding
- Mostly and some breastfeeding
- Mostly and some breastfeeding multiples
- Nonbreastfeeding

Cheese (1 lb) and one of the following items:

- Fat-free evap milk (1 can)
- Low-fat/skim milk (1 qt)
- Buttermilk (1 qt)
- Yogurt (32 oz)

Women Who Receive Food Package VII

- Fully breastfeeding
- Mostly breastfeeding multiples
- Pregnant with multiples
- Pregnant and fully or mostly breastfeeding

Cheese (1 lb or 2 lb) in addition to (1 lb) cheese in the default food package, plus one or two of the following items:

- Fat-free evap milk (1 can)
- Low-fat/skim milk (1 qt)
- Buttermilk (1 qt)
- Yogurt* (32 oz)
- *When a fully breastfeeding woman requests (2 lbs) cheese in addition to (1 lb) cheese in the default food package, yogurt is not allowed.

Adjust default food prescriptions to select fish options (tuna, sardines and/or salmon) preferred by participant receiving Food Package VII.

WIC certifier is not allowed to perform the following:

- 1. Prescribe skim milk to children (12-23 months of age)
- 2. Prescribe or make substitutions of lactose free milk, soy milk, goat milk, tofu, nonfat dry milk, 2% milk, or whole milk to women and children (24-59 months of age)
- 3. Prescribe any contract RTU formula, exempt formula, or WIC-eligible nutritionals
- 4. Prescribe any combination of formulas
- 5. Exchange any formula
- 6. Prescribe formula for partially breastfed infants
- 7. Increase prorated food package to full amount
- 8. Prescribe homeless food package

Choices of Dry Beans, Canned Beans, and Peanut Butter for Food Package V and VII

Women who receive food package V or VII can choose any combination of two of the following items: 4 cans of beans, dry beans, or peanut butter.

Option #1	Option #2	Option #3	Option #4	Option #5	Option #6
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Milk and Milk Alternatives Requirements [Medical Documentation and Competent Professional Authority (CPA) Determination of Need]

- Issuance of whole milk to women and children (24-59 months of age) requires a <u>WIC-27</u> form and issuance of an exempt formula or WIC-eligible nutritional. (Refer to policies 2.07000 and 2.07900).
- Issuance of soy milk or tofu to children (12-59 months of age) requires a CPA determination of need, but does not require a WIC-27 form.

Milk	Allowed Size	Children 12-23 Months	Children 24-59 Months	Women
Whole milk	Quart, ½ gallon, gallon	Allowed	WIC-27	WIC-27
Lactose free whole milk	½ gallon	Allowed	WIC-27	WIC-27
Evap whole milk	12 oz can	Allowed	WIC-27	WIC-27
Goat milk (evap whole)	12 oz can	Allowed	WIC-27	WIC-27
2% milk	Quart, ½ gallon, gallon	CPA determination of need	CPA determination of need	CPA determination of need
Soy milk	½ gallon	CPA determination of need	CPA determination of need	Allowed
Tofu	16 oz	CPA determination of need	CPA determination of need	Allowed
Milk (skim - 1%)	Quart, ½ gallon, gallon	Not allowed	Allowed	Allowed
Yogurt (low-fat and nonfat)	32 oz	Not allowed	Allowed	Allowed
Lactose free milk (skim - 1%)	½ gallon	Not allowed	Allowed	Allowed
Evap nonfat (skim) milk	12 oz can	Not allowed	Allowed	Allowed
Goat milk (nonfat powder)	12 oz can	Not allowed	Allowed	Allowed
Nonfat dry milk (powder)	8 quart box	Not allowed	Allowed	Allowed
Cultured buttermilk	Quart	Not allowed	Allowed	Allowed
Cheese	8 oz or 16 oz	Allowed	Allowed	Allowed

Basic Rules for Issuing Soy-Based Beverage, Cheese, Yogurt, and Tofu

	issuing 30y-based beverage, encese, rogart, and rold
Soy-based beverage	 Children – 1 qt of soy-based beverage may be substituted for 1 qt milk up to the total maximum allowance of milk CPA determination of need for food allergy, lactose intolerance, vegan diets, and cultural food preference is required A WIC 27 form is not required Women – 1 qt of soy-based beverage may be substituted for 1 qt milk up to the total maximum allowance of milk CPA determination of need is not required
Cheese	 Children and Pregnant and Postpartum Women - A maximum of 1 lb of cheese may be substituted for 3 qts ofmilk CPA determination of need is not required Fully Breastfeeding Women - A maximum of 2 lbs of cheese may be substituted for 6 qts of milk CPA determination of need is not required
Yogurt (low-fat and nonfat)	 Children (24-59 months of age) and Women - A maximum of 32 oz of yogurt may be substituted for 1 qt of milk CPA determination of need is not required A WIC-27 form is not required Children (12-23 months of age) are not allowed to receive yogurt
Tofu	 Children – 1 lb of tofu may be substituted for 1 qt of milk up to the maximum allowance of milk CPA determination of need for food allergy, lactose intolerance, vegan diets, and cultural food preference is required A WIC-27 form is not required Women – 1 lb of tofu may be substituted for 1 qt of milk up to the maximum allowance of milk CPA determination of need is not required

Parents and caregivers should be made aware that children's diets may be nutritionally inadequate when milk is replaced by other foods, and should be provided appropriate nutrition education. The value of milk for WIC participants, particularly in the development of bone mass for children, should be emphasized. Lactose-free or lactose-reduced fortified dairy products should be offered before non-dairy milk alternatives to those participants with lactose intolerance that cannot drink milk. Also, if milk is replaced by milk alternatives that are not vitamin D fortified, vitamin D intakes may be inadequate. Thus, replacements for milk are to be approached with caution even if they are rich in calcium. Issuance of tofu and soy-based beverage as substitutes for milk for children requires an individual nutritional assessment by the CPA. (12276 Federal Register / Vol. 79, No. 42 / Tuesday, March 4, 2014 / Rules and Regulations) https://www.gpo.gov/fdsys/pkg/CFR-2018-title7-vol4-part246.xml/seqnum246.10

Conversion of Fluid Milk to Evaporated Milk, Evaporated Goat Milk, PWD Goat Milk, and Nonfat Dry Milk

Fluid Milk	Evaporated Milk and Evaporated Goat Milk 12 fl oz can	PWD Goat Mil k 1 can = 3 qts	Nonfat Dry Milk 1 box = 8 qts
1 qt milk	1 can		
2 qts milk	2 cans		
3 qts milk	4 cans	1 can	
4 qts milk (1 gallon)	5 cans		
5 qts milk	6 cans		
6 qts milk	8 cans	2 cans	
7 qts milk	9 cans		
8 qts milk (2 gallons)	10 cans		1 box
9 qts milk	12 cans	3 cans	
10 qts milk	13 cans		
11 qts milk	14 cans		
12 qts milk (3 gallons)	16 cans	4 cans	
13 qts milk	17 cans		
14 qts milk	18 cans		
15 qts milk	20 cans	5 cans	
16 qts milk (4 gallons)	21 cans		2 boxes
17 qts milk	22 cans		
18 qts milk	24 cans	6 cans	
19 qts milk	25 cans		
20 qts milk (5 gallons)	26 cans		
21 qts milk	28 cans	7 cans	
22 qts milk	29 cans		
23 qts milk	30 cans		
24 qts milk (6 gallons)	32 cans	8 cans	3 boxes